LETTERS

Professionalism in Pharmacy: A Continual Societal and Intellectual Challenge

To the Editor. In early January 2012, a shocking news for the pharmacists and a sad report for the nation struck Malaysia. Two pharmacists were found involved in transferring psychotropic medications out of hospitals and smuggling them into the black market.¹ Subsequently, the ministry of health decided to table “The Pharmacy Bill 2012” in the parliament to empower the ministry to take stiffer penalties on pharmaceutical offenders.²

The question should be how such offences could happen rather than asking what should be the punishment for those who commit such transgressions. The approach should be a diagnostic attempt to find out the cause, motivation, and rationale behind such unprofessional and reprobat acts. Within this context, one may ask, if it stemmed from lack of educational effort on topics related to pharmacy ethics and professionalism especially in the developing countries?

The mission and vision of colleges and schools of pharmacy in Malaysia are well-defined. These schools emphasize professionalism and codes of conduct—albeit more emphasis is placed on the symbolic frame of professionalism³ (ie, white coat ceremonies, dress codes, etc). These schools continuously assess the professionalism of their students, from the day of enrolment to the day of graduation.

Discussion of professionalism and pharmacy education has generated a substantial amount of literature over the years.^{4,5} Schools and colleges of pharmacy in North America have been the pioneers and modernizers in the areas of professionalization in the practice of pharmacy as well as pharmacy education.^{4,6} Professionalism in pharmacy is a multifaceted and dynamic process,³ instigating a continuous development in defining and refining the traits of professionalism,⁴ resulting in creation of peer-reviewed and referenced documents that are updated regularly.⁷ These documents serve as guidelines to define, understand, and assess professionalism, by the academy in North America as well as in academic circles elsewhere. Hence, there is a globally cohesive and unified understanding of the overall concept of professionalism and professionalization.

Nevertheless, a lack of consensus on which skills or activities describe what is means to be a professional³ and differences on how, when, and where professionalism should be taught, assessed, and monitored, have made

professionalism and professionalization more challenging and argumentative topics.

We need to understand that the process of professionalization is not a discrete entity that is commenced at a specific time and ends at a time later. Professionalization is a continuum that never ends. The schools and colleges of pharmacy should not absolve themselves of responsibilities related to the professional performance of their students after they graduate. These schools and colleges should respect the need for an amendment to the current syllabi on professionalism that allows an “extension to the chain of professionalization-related responsibilities” which goes from beyond the academic environment (ie, classrooms, tutorial sessions) to the working environment (ie, community pharmacies, hospitals, clinics etc).

There is no doubt that new queries related to the performance of professional duties should be investigated in the context of law, moralities, and ethics,⁸ the schools and colleges of pharmacy also need to respond to such queries with a full sense of responsibility and accountability.

Not only the ministry of health and parliament are responsible to deal with misdemeanour of this sort, but also the pharmacy boards and associations, schools and colleges of pharmacy should realize and accept the responsibility and accountability in managing such intricate situations.

Keivan Ahmadi, PhD Candidate,^a

Mohamed Azmi Ahmad Hassali, PhD^b

^a Monash University, Sunway Campus, Malaysia

^b Universiti Sains Malaysia, Penang, Malaysia

REFERENCES

1. Anon. Police recover drugs stolen from hospital. *The Star Online*. <http://thestar.com.my/news/story.asp?file=/2012/1/3/nation/20120103144404&sec=nation>. Accessed April 13, 2012.
2. Anon. Stiffer penalties for drug-related offences. *TheSundaily*. <http://www.thesundaily.my/news/309832>. Accessed April 13, 2012.
3. Thompson DF, Farmer KC, Beall DG, et al. Identifying perceptions of professionalism in pharmacy using a four-frame leadership model. *Am J Pharm Educ*. 2008;72(4):Article 90.
4. Hammer DP, Berger BA, Beardsley RS, Easton MR. Student professionalism. *Am J Pharm Educ*. 2003;67(3):Article 96.
5. Popovich NG, Hammer DP, Hansen DJ, et al. Report of the AACP professionalism task force, May 2011. *Am J Pharm Educ*. 2011;75(10):Article S4.
6. Brehm B, Breen P, Brown B, et al. An interdisciplinary approach to introducing professionalism. *Am J Pharm Educ*. 2006;70(4):Article 81.
7. American College of Clinical Pharmacy, Roth MT, Zlatic TD. Development of Student professionalism. *Pharmacother*. 2009;29(6):749-756.
8. DiPiro JT. The pharmacist’s right to refuse: a learning opportunity. *Am J Pharm Educ*. 2005;69(5):Article 92.